

HAZARDOUS MATERIAL/WASTE EMERGENCY NOTIFICATION CHECKLIST

INITIAL NOTIFICATION CHECKLIST FOR USE UPON DISCOVERY OF A RELEASE OR THREATENED RELEASE OF HAZARDOUS MATERIAL OR WASTE, OR OTHER HAZARDOUS MATERIAL OR WASTE INCIDENT. Reference CAL ARNGR 200-1.

1. Notify responsible persons:

NAME

WORK PHONE

HOME PHONE

a. _____

b. _____

2. Activate facility alarms, or give verbal alarm.

3. Notify local fire and law enforcement agency:

a. Call 911

b. Designated employee prepares to direct emergency response units to scene of incident.

4. Initiate mitigation and/or evacuation plans:

a. Account for all employees

b. Have resource material available for use by responding agencies (Material Safety Data Sheets; facility plot plans; chemical, hazardous material and waste inventories; HMMP binder).

c. What actions have been taken by facility personnel to mitigate or control the incident?

5. Other actions to take while waiting for emergency response agency to arrive:

a. Secure the incident scene to include traffic control and area security to keep bystanders out of harm's way.

b. Move other materials/wastes potentially at hazard away from incident scene if it can be done with minimal personal safety risk.

c. Apply first-aid if qualified, or seek qualified aid if needed.

6. Notify remainder of emergency notification list:

a. Local agency administering Hazardous Materials Management Plan

POC: _____

Phone: () _____

b. State Office of Emergency Services: (800) 852-7550

CAL ARNG Form 200-1-8a (revised 1 May 1992)

6. (Continued)

c. State Military Department

(1) Emergency Operations Center (916) 854-3441, DSN 466-3441
or (800) 322-OTAG

(2) Environmental Office (916) 854-3651 or DSN 466-3651

(3) Public Affairs Office (916) 854-3304 or DSN 466-3304

d. Regional Water Quality Control Board (if incident involves any
sort of water way)

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7. Information to be supplied over telephone:

a. Date and Time incident occurred: _____

b. Nature of incident (spill, fire, explosion, etc.): _____

c. Location of incident (OMS, motor pool, POL shed, etc.): _____

d. Name(s) of hazardous material/waste involved: _____

e. Approximate quantity and area involved: _____

f. Safe location on or near the facility where emergency responders
can meet Facility On-Scene Emergency Coordinator.

g. Whether or not any injuries have occurred, and cause.

h. Whether or not facility is being evacuated.

i. Whether or not surrounding area needs to be evacuated.

j. Name and phone number of person reporting incident.

k. Other information as requested. Remain on the telephone with the
emergency dispatch operator until specifically told that you no
longer need to maintain contact.

Grade, Name and Phone Number of person making notification:

Date and Time: _____

Organization and Commander:

7. COMPLETE THIS FORM BEFORE EMERGENCY RESPONSE AGENCIES ARRIVE.
PROVIDE COPY TO EMERGENCY RESPONSE AGENCY IF REQUESTED. FAX COPY TO
OTAG ENVIRONMENTAL OFFICE AT (916) 854-3365 WITHIN 48 HOURS OF
INCIDENT; MARK FAX HEADER "URGENT - HAND CARRY TO ENVIRONMENTAL OFFICE
IMMEDIATELY". Complete CAL ARNG Form 200-1-8b and FAX it to OTAG
Environmental Office within 72 hours of incident.